

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Michael P. DeNinno et al.
Serial No: 10/099,620
Filed: March 15, 2002
For: COMPOUNDS FOR THE
TREATMENT OF ISCHEMIA

Examiner: Lawrence Crane
Art Unit: 1623
Docket: 17423 (PC11066A)
Dated: February 8, 2005

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Confirmation No.: 2274

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

SUPPLEMENTAL AMENDMENT

Sir:

Applicants respectfully submit a Supplemental Amendment to the above-identified application.

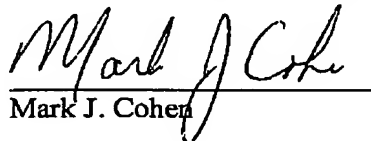
A listing of the claims pending in the above-identified application commences on Page 2 of this Response. This listing replaces all previous amendment to the claims.

The Remarks begin on Page 34 of this Response.

CERTIFICATION OF FACSIMILE TRANSMISSION

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Dated: February 8, 2005


Mark J. Cohen

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& PRESSER**

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To: Lawrence Crane
United States Patent & Trademark Office
Art Unit: 1623
Confirmation No.: 2274

From: Mark J. Cohen, Esq.

Fax: 1-703-872-9306

Pages: 38 (including fax cover sheet)

Phone:

Date: February 8, 2005

Re: Michael P. DeNinno, et al.
U.S. Patent Application No. 10/099,620
Our Docket: 17423 (PC11066A)

CC:

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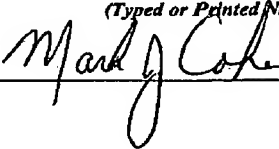
Attached for submission to the U.S. Patent and Trademark Office are the following:

- Certificate of Transmission by Facsimile
- Amendment Transmittal Letter (in duplicate)
- Supplemental Amendment

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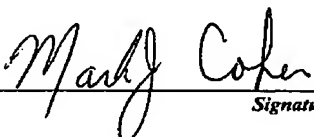
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CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No. 17423 (PC11066A)	
Applicant(s): Michael P. DeNinno et al.				
Application No. 10/099,620		Filing Date March 15, 2002		Examiner Lawrence Crane
				Group Art Unit 1623
Invention: COMPOUNDS FOR THE TREATMENT OF ISCHEMIA				
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<p>I hereby certify that this <u>Supplemental Amendment</u> (Identify type of correspondence) is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>1-703-872-9306</u>) on <u>February 8, 2005</u> (Date)</p> <p style="text-align: right;"><u>Mark J. Cohen</u> (Typed or Printed Name of Person Signing Certificate)  (Signature)</p> <p style="text-align: center;">Note: Each paper must have its own certificate of mailing.</p>				

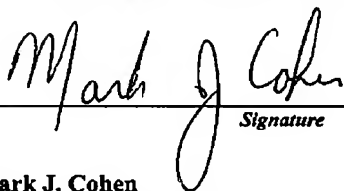
P18/REV02

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AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. 17423 (PC11066A)							
Applicant(s): Michael P. DeNinno et al.												
Application No. 10/099,620	Filing Date March 15, 2002	Examiner Lawrence Crane	Customer No. 23389	Group Art Unit 1623	Confirmation No. 2274							
Invention: COMPOUNDS FOR THE TREATMENT OF ISCHEMIA												
<u>COMMISSIONER FOR PATENTS:</u>												
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.												
CLAIMS AS AMENDED												
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE							
TOTAL CLAIMS	31 -	53 =	0	x \$50.00	\$0.00							
INDEP. CLAIMS	5 -	8 =	0	x \$200.00	\$0.00							
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00							
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00							
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 19-1013/SSMP <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.												
 _____ Signature			Dated: February 8, 2005									
Mark J. Cohen Registration No.: 32,211 SCULLY, SCOTT, MURPHY & PRESSER 400 Garden City Plaza-Sste. 300 Garden City, NY 11530 (516) 742-4343			<table border="1" style="width:100%"><tr><td colspan="2">I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on February 8, 2005 (Date)</td></tr><tr><td colspan="2">_____ Signature of Person Mailing Correspondence</td></tr><tr><td colspan="2">Mark J. Cohen Typed or Printed Name of Person Mailing Correspondence</td></tr></table>				I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on February 8, 2005 (Date)		_____ Signature of Person Mailing Correspondence		Mark J. Cohen Typed or Printed Name of Person Mailing Correspondence	
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Mark J. Cohen Typed or Printed Name of Person Mailing Correspondence												
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AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. 17423 (PC11066A)							
Applicant(s): Michael P. DeNinno et al.												
Application No. 10/099,620	Filing Date March 15, 2002	Examiner Lawrence Crane	Customer No. 23389	Group Art Unit 1623	Confirmation No. 2274							
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	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE							
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INDEP. CLAIMS	5 -	8 =	0	x \$200.00	\$0.00							
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00							
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00							
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 19-1013/SSMP <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.												
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 _____ Signature			Dated: February 8, 2005									
Mark J. Cohen Registration No.: 32,211 SCULLY, SCOTT, MURPHY & PRESSER 400 Garden City Plaza-Ste. 300 Garden City, NY 11530 (516) 742-4343			<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2"> I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on February 8, 2005 (Date) </td> </tr> <tr> <td colspan="2" style="text-align: center;"> Signature of Person Mailing Correspondence Mark J. Cohen </td> </tr> <tr> <td colspan="2" style="text-align: center;"> Typed or Printed Name of Person Mailing Correspondence </td> </tr> </table>				I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on February 8, 2005 (Date)		Signature of Person Mailing Correspondence Mark J. Cohen		Typed or Printed Name of Person Mailing Correspondence	
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